

**U.S. DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS**  
**ATTORNEY APPEARANCE FORM**

NOTE: In order to appear before this Court an attorney must either be a member in good standing of this Court's general bar or be granted leave to appear *pro hac vice* as provided for by Local Rules 83.12 through 83.14.

In the Matter of

Case Number: 14-cv-1748

In Re: Testosterone Replacement Therapy Products Liability  
Litigation (MDL No. 2545)

Pursuant to CMO No. 3 counsel's email is flonger@lfsblaw.com

AN APPEARANCE IS HEREBY FILED BY THE UNDERSIGNED AS ATTORNEY FOR:  
Plaintiffs, Walter and Donna McGill

NAME (Type or print) Frederick S. Longer	
SIGNATURE (Use electronic signature if the appearance form is filed electronically) s/ Frederick S. Longer	
FIRM Levin, Fishbein, Sedran & Berman	
STREET ADDRESS 510 Walnut Street, Suite 500	
CITY/STATE/ZIP Philadelphia, PA 19106	
ID NUMBER (SEE ITEM 3 IN INSTRUCTIONS)	TELEPHONE NUMBER 215-592-1500
ARE YOU ACTING AS LEAD COUNSEL IN THIS CASE?      YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
ARE YOU ACTING AS LOCAL COUNSEL IN THIS CASE?      YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
ARE YOU A MEMBER OF THIS COURT'S TRIAL BAR?      YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
IF THIS CASE REACHES TRIAL, WILL YOU ACT AS THE TRIAL ATTORNEY?      YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
IF THIS IS A CRIMINAL CASE, CHECK THE BOX BELOW THAT DESCRIBES YOUR STATUS.	
RETAINED COUNSEL <input type="checkbox"/>	APPOINTED COUNSEL <input type="checkbox"/>